## M19000010125

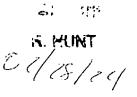
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
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(Document Number)					
Certified Copies Certificates of Status					
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Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 281002 8435053

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: January 23, 2024

ORDER TIME : 8:43 AM

ORDER NO. : 281002-205

CUSTOMER NO: 8435053

## CHANGE OF AGENT

NAME: REALTECH TITLE LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Miller

EXAMINER'S INITIALS:

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

i. N	ame of the limited liability company:	TITLE LLC		
2. (a)		(b	)	
(_,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(0	Mailir	ng address of limited liability company: ote: MAY BE POST OFFICE BOX)
	3001 LEADENHALL ROAD		3001 LEADEN	NHALL ROAD
	MOUNT LAUREL, NJ 08054	<del></del>	MOUNT LAUF	REL, NJ 08054
	10/29/2019		M1900001042	5
3.	Date of filing/registration in Florida	4.	Doc	rument number
5. (a)				
` '	Registered Agent and Registered Office shown on the records	of the Florida	Dept. of State:	
	CORPORATE CREATIONS NETWORK, INC.			हुन इ.स. इ.स.
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			<del>- 1</del>
	801 US HIGHWAY 1			
	NORTH PALM BEACH	FL 33408	<del></del>	
	<del></del>			AMIO: 21 V OF STAT VSSEE, FL
(b)	Enter name of NEW Registered Agent and/or NEW Register	1000		FAT 2
	Enter name of NEW Registered Agent and/or NEW Register	red Office add	ress;	m =
	Corporation Service Company			
	NEW Registered Office Address:			
	1201 Hays Street			
	Tallahassee	32301		
		FL		
change agent was/w	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	he registered liability cons s of the limi	I office and the npany, it is here ted liability con	business office of the registered eby confirmed that the change(s) npany or as otherwise provided in
	Xie E. Clari	JILL	CILMI, AUTHO	PRIZED PERSON
Signa	sture of a rhember or authorized representative of a member		Print	ted or typed name of signee
provis the obt to mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provic ely reflect a change in the registered office address, d in writing of this change.	igree to act i te performa ded for in Ci I hereby coi	n this capacity, nce of my duties napter 605, F.S. nfirm that the li	I further agree to comply with the s, and I am familiar with and accept . Or, if this document is being filed mited liability company has been
	Dm. 7-Kuble	GRACE	E. KIRBY, ASS	ST. VICE PRESIDENT
Signati	re of Registered Agent			